

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



September 8, 2004

ALL COUNTY INFORMATION NOTICE NO. I-58-04

TO: ALL COUNTY WELFARE DIRECTORS

FROM: KATHY FARMER, Chief
Financial Management and Contracts BranchSUBJECT: **TITLE XX SOCIAL SERVICES BLOCK GRANT EXPENDITURE
REPORT****REASON FOR THIS TRANSMITTAL**

- ☐ State Law Change
- ☐ Federal Law or Regulation Change
- ☐ Court Order
- ☐ Clarification Requested by One or More Counties
- ☒ Initiated by CDSS

The California Department of Social Services (CDSS) has published the "Title XX Social Services Block Grant Pre-Expenditure Report for the period of July 1, 2004 through June 30, 2005". It summarizes Title XX expenditures, program responsibilities, and the population served. This report must be submitted annually to the Department of Health and Human Services.

This report is to be provided, upon request, to any interested public agency that may wish to provide its comments to Congress.

The report can be obtained by going to the CDSS web page at <http://www.dss.cahwnet.gov/>.

If you have any questions or comments, please contact Ms. Sue Tognet at (916) 654- 0643.

TITLE XX BLOCK GRANT PRE-EXPENDITURE REPORT

July 1, 2004 through June 30, 2005



Prepared by
California Department of Social Services

Health and Human Services Agency
State of California
Arnold Schwarzenegger, Governor

**TITLE XX SOCIAL SERVICES BLOCK GRANT
PRE-EXPENDITURE REPORT**

This report covers the period July 1, 2004 through June 30, 2005, describing the programs that will receive Title XX funds.

Since October 1981, Federal monies for social services have been given to states as a Block Grant for Social Services. In order to qualify for these funds, a state must prepare and announce an expenditure plan; this report represents that plan.

Copies of this report are being provided to all 58 County Welfare Departments. Additional copies may be obtained through request of the Department. Comments concerning this report are welcome. All comments should be addressed to:

California Department of Social Services
Budget Bureau
744 P Street, M.S. 8-601
Sacramento, California 95814

I. PROGRAM INTRODUCTION

The public social services system in California is administered locally by the 58 counties and is supervised by the State of California Department of Social Services (CDSS). The state-county system addresses three of the five federal service goals under Title XX through an array of social services administered by four divisions within the Department. These divisions are Community Care Licensing Division, Welfare to Work Division, and Office of Human Rights and Community Relations. Specific social services programs supervised by these divisions include Child Welfare Services, Community Care Licensing, CalWORKs Child Care Program, and Deaf Access.

The Department of Developmental Services (DDS) also addresses goals under Title XX by providing services directly through seven state developmental centers and indirectly through a statewide network of 21 private, nonprofit Regional Centers.

The California Department of Education (CDE) also addresses goals under Title XX by providing services directly through several major programs in both center-based care and certificate-based programs.

The total level of program services available within the State is subject to yearly appropriations by the State Legislature and Congress.

II. INTENDED USE OF BLOCK GRANT

It is the State's intent to use the Title XX Social Services Block Grant (SSBG) funds to assist in funding benefits during the State fiscal year (FY) beginning July 1, 2004, and ending June 30, 2005, for the following programs:

- Child Welfare Services
- DDS Regional Center Program
- Community Care Licensing
- CDE Child Care Programs
- CalWORKs Child Care Program
- Deaf Access

This proposal outlines State SSBG services consistent with the five statutory goals:

- 1) Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency;
- 2) Achieving or maintaining self-sufficiency, including reduction or prevention of dependency;
- 3) Preventing or remedying neglect, abuse or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating or reuniting families;

- 4) Preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care; and
- 5) Securing referral or admission for institutional care when other forms of care are not appropriate for providing services to individuals in institutions.

Appendix A identifies the federal goals that are met by each program funded by Title XX of the Social Security Act.

III. FISCAL DISPLAY

Appendix B contains a fiscal display detailing intended expenditures of the Title XX SSBG by program as well as program funding from other sources.

IV. ASSURANCES

The State Department of Social Services and the Department of Developmental Services assure that these programs have been and will continue to be administered in compliance with 45 CFR, Parts 80, 84, 86, 90 and 91 so that no person shall on the grounds of race, color, national origin, age, sex, or condition of physical or mental disability be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under this program.

V. PROGRAM OUTLINES

The following section describes the individual program areas. Each program description includes the types of activities to be supported and the categories and characteristics of the individuals to be served.

CHILD WELFARE SERVICES

A. Intent

The intent of Child Welfare Services is specified in Welfare and Institutions Code Section 16501. Child Welfare Services are provided to Family Reunification (FR) and Permanency Planning (PP) cases to achieve the goals specified in the child's case plan. FR cases receive services to enable a child and family to ameliorate the problems that led to the child removal so the child may return home. In instances where a child cannot return home alternate permanency is sought. Services are provided to PP cases to achieve an alternate permanent placement for the child such as guardianship or adoption.

B. Service Delivery

Services to FR and PP cases provided to a child and family based on an assessment of the child and family's needs and specified in a case plan. This case plan results from a court order or a voluntary placement agreement between a family and a county agency. The focus of the services provided by the county agency are to ameliorate the problems that led to a child's removal so the child may be reunited with his or her family or to provide services to assist a child in finding a permanent family and thus exit foster care.

C. Recipient Characteristics

Approximately 84,000 children receive services as either family reunification or permanent placement cases each year. A majority of the children who receive services have been removed from their families because of child abuse or neglect.

D. Program Eligibility

All children who are adjudged court dependents or who are voluntarily placed by their families receive Child Welfare Services. The amount of Title XX expenditures is calculated based on the amount of non-matching State General Fund attributable to the FR and PP caseload. These would be State General Fund services costs for only those foster care cases where the child is placed out of home and therefore meet the 1996 AFDC income standards.

E. Program Components or Contents

The following is a partial list of services which may be provided:

- Counseling
- Emergency Shelter Care
- Respite Care

- Parenting Training
- Substance Abuse Testing
- Transportation

These services are typically purchased by the county from community based service providers.

DEPARTMENT OF DEVELOPMENTAL SERVICES REGIONAL CENTER PROGRAM

A. Intent

It is the intent of the California Legislature that regional centers assist persons with developmental disabilities and their families in securing those services and supports which maximize opportunities and choices for living, working, learning, and recreating in the community.

Regional centers are private, non profit agencies with which the Department of Developmental Services contracts annually to provide the services specified in the Lanterman Developmental Disabilities Act (W&IC, Division 4.5, Section 4620, et al.). Each regional center design reflects the maximum cost-effectiveness possible and is based on a service coordination model.

Regional centers provide services to consumers residing in the community, consumers residing in the developmental centers, and consumers who require provisional placement. Moreover, the regional centers work closely with the developmental centers in an attempt to deflect admissions and to identify inappropriate institutional care.

Regional centers also serve vital functions in their communities. They provide information to the public and professional groups. Regional centers are responsible for the development of quality community programs and resource development. They also monitor the quality of services provided to their consumers and seek to improve those services through training, technical assistance, and other methods.

B. Services Delivery

There are 21 regional centers that were selected based on geographic accessibility and population density. The catchment area boundaries for the regional centers conform to county boundaries or groups of counties, except in Los Angeles County, which is divided into seven areas, each served by a regional center.

Each consumer participates in the development of an Individual Program Plan (IPP) which details the goals and objectives designed to meet the consumer's needs and preferences. The regional center purchases services and supports from approved vendors and accesses services from other publicly and privately funded agencies. The IPP is completed within 60 days of determining the consumer's eligibility for services and at least once every three years. The IPPs are prepared jointly by representatives of the regional center, the consumer and the consumer's parents, guardian or conservator (if appropriate), and other persons invited by the consumer.

Services delivered include protective supervision, placing and monitoring consumers in the least restrictive residential settings, securing through

purchasing or by obtaining from generic agencies or other resources, services and supports specified in the person's Individual Program Plan, funding for family support services, coordination of service and support programs, collection and dissemination of information and monitoring implementation of the plan to ascertain that objectives have been fulfilled and to assist in revising the plan as necessary.

C. Recipient Characteristics

The developmental services system serves children and adults who have a developmental disability (mental retardation, cerebral palsy, epilepsy, autism, and other related conditions), or who are at risk of having a developmental disability. Also, the families of such individual also receive family support services necessary to maintain their son or daughter in the least restrictive residential setting.

D. Program Eligibility

Any person believed to have a developmental disability, and any person believed to have a high risk of parenting a developmentally disabled infant shall be eligible for initial intake and assessment services in the regional centers. In addition, the program will serve any infant having a high risk of becoming developmentally disabled.

A child less than 36 months of age whose genetic, medical, or environmental history is predictive of a substantially greater risk of developmental disability than the general public is a "high-risk infant". The total regional center California community population is estimated at 194,148 consumers to be in state FY 2004/2005 and includes those consumers who reside in the developmental centers.

E. Program Components or Contents

Services delivered to consumers encompass case finding and outreach, intake, diagnosis and assessment, preventive services to potential parents and persons at risk of having developmental disabilities, individual program planning advocacy, monitoring and evaluation, and case management.

COMMUNITY CARE LICENSING

A. Intent

The Community Care Licensing Division (CCLD) is a regulatory enforcement program with the responsibility of protecting the health and safety of children and adults residing or spending a portion of their time in out-of-home care. The program includes prevention, compliance, and enforcement components.

Licensing activities are performed by both state and county staff. State district offices license facilities in 14 licensing categories. Counties have the option of retaining the licensing function for Family Child Care and Foster Family Homes in their local area or transferring the responsibility back to the State.

Legislative/Statutory Authority

Health and Safety Code, Sections 1508 (Community Care Facilities Act), 1568.02 (Residential Care Facilities for the Chronically Ill Act), 1569.11 (Residential Care Facilities for the Elderly Act), 1596.80 (Child Day Care Act), authorizes the CCLD to license these programs:

Licensing Categories:	Adoption Agencies
	Adult Day Care
	Adult Residential Facilities
	Child Care Centers
	Community Treatment Facilities
	Family Child Care Homes
	Foster Family Agencies
	Foster Family Homes
	Group Homes
	Residential Care for the Chronically Ill
	Residential Care for the Elderly
	Small Family Homes
	Social Rehabilitation Facilities
	Transitional Housing Placement

B. Service Delivery

Facilities licensed by CCLD provide care and supervision to children and adults in out-of-home care programs. The ultimate responsibility of CCLD is to protect the health and safety of children and adults who require care in these programs because of age, physical disability or mental disability. This is accomplished through the three components of the program:

- Prevention - the reduction of predictable harm by screening out unqualified applicants and by providing applicants and licensed providers with information regarding the laws and regulations concerning the operation of CCLD facilities.
- Compliance - The process which ensures that CCLD facilities are operated according to applicable laws and regulations. Compliance is

maintained through facility inspection, issuing deficiency notices, and providing consultation regarding the correction of deficiencies.

- Enforcement - A range of corrective actions (from civil penalties to facility closure) when a provider fails to protect the health and safety of people in care or is unwilling to maintain compliance with licensing laws and regulations.

C. Recipient Characteristics

Community care was originally envisioned as a normalizing, homelike setting and the least restrictive environment for clients. In recent years, the program expanded to include care for persons who have severe behavior adjustment problems, serious mental disorders and significant medical needs. Many more clients with higher care needs required a much higher level of medical care or psycho-social services.

The population cared for in facilities licensed by CCLD district offices and contracted counties require care and supervision because of age, physical disability or mental disability. In FY 2004/2005, caseload projections show that there will be 26,961 licensed residential programs and 64,689 child day care programs with a combined capacity of over 1,441,960 children and adults.

D. Program Eligibility

Community Care Facilities provide care and supervision to children and adults that reside or spend a portion of their time in out-of-home care.

Facilities licensed by the CCLD must meet minimum licensing standards in order to maintain the privilege of providing care and supervision to children and adults.

E. Program Components or Contents

The CCLD licensing categories include:

- Adoption Agencies (AA) provide adoptive services, placement of children for adoption and supervision of the adoptive placements. Caseload projections for FY 2004/2005 show that there will be 111 such facilities.
- Adult Day Care Facilities (ADCF) provide a variety of social and support services for elderly adults in a day care setting. Projections show that there will be 772 of these programs in California serving 38,224 clients in FY 2004/2005.
- Adult Residential Facilities (ARF) provides 24-hour non-medical care for adults ages 18 to 59. Caseload projections for FY 2004/2005 show that there will be 4,930 facilities serving over 40,177 clients.
- Child-Care Centers (CCC) provides 24-hour per day care and supervision for children in a group setting. Caseload projections show

14,983 licensed CCC programs in FY 2004/2005 caring for over 690,724 children.

- Community Treatment Facilities (CTF) provide 24-hour non-medical care mental health treatment in a secure residential environment to severely emotionally disturbed children. Projections for FY 2004/2005 show that there will be 5 facilities serving 143 clients.
- Family Child Care Homes (FCCH) provide child day care for up to 12 children in the licensees' own home for periods of less than 24 hours per day. Caseload projections show 49,706 licensed FCCHs in FY 2004/2005 caring for over 464,570 children. About 7 percent of the FCCH programs are licensed by the counties under contract with CCLD.
- Foster Family Agencies (FFA) recruit foster parents, certify and monitor homes for use by the agency, provide professional support to foster parents, and arrange placement of children. Caseload projections show that there will be 477 licensed FFAs in FY 2004/2005.
- Foster Family Homes (FFH) provide 24-hour non-medical care (medical care is permitted under certain circumstances) in the licensee's family residence for not more than six foster children. In FY 2004/2005 there will be 11,817 licensed FFHs in California serving over 29,938 children. Most FFHs are licensed by the counties through contract with CCLD.
- Group Homes (GH) provide 24-hour non-medical care to children in a structured environment. Caseload projections for FY 2004/2005 show that there will be 1,750 GH facilities serving over 17,094 clients.
- Residential Care Facilities for the Chronically Ill (RCF-CI) provide 24-hour care and supervision for adults who have Acquired Immune Deficiency Syndrome (AIDS) or the Human Immunodeficiency Virus (HIV). Caseload projections for FY 2004/2005 show that there will be 22 facilities serving 339 clients.
- Residential Care Facilities for the Elderly (RCFE) provide non-medical care (medical care may be provided under certain conditions) to persons over 60 years of age. Projections for FY 2004/2005 indicate that there will be 6,600 RCFEs caring for over 157,506 residents.
- Small Family Homes (SFH) provide 24-hour care in the licensee's family residence for six or fewer children. Caseload projections for FY 2004/2005 show that there will be 366 such facilities serving over 1,631 clients.
- Social Rehabilitation Facilities (SRF) provide 24-hour non-medical care to adults recovering from mental illness. SRFs are a new licensing category. Projections show that there will be 75 SRFs in FY 2004/2005 serving around 957 clients.

- Transitional Housing Placement (THP) provides supervised apartment living services to children at least 17 years of age who are under the supervision of a county welfare or county probation department and participating in an independent living program. Caseload projections for FY 2004/2005 show 36 licensed THPs and a capacity of 657 clients.

To ensure that CCLD facilities are operated according to applicable laws and regulations, CCLD is required to:

- Review, approve, or deny applications for facility license.
- Secure criminal record clearances on applicants, owners, staff, and non-client adult residents of facilities prior to contact with clients.
- Investigate complaints against facilities and serious incidents.
- Develop and enforce regulations to protect client health, safety, and human rights.
- Annually visit and evaluate licensed facilities identified as needing specific attention and randomly visit 10% of the remaining facilities.
- Monitor facilities for compliance with licensing laws and regulations.
- Pursue enforcement actions against facilities in violation of licensing laws and regulations.

CHILD CARE PROGRAMS – CALIFORNIA DEPARTMENT OF EDUCATION (CDE)

A. Intent

Pursuant to the Education Code and the Child Care and Development Services Act, it is the intent of the Legislature that all families have access to child care and development services, through resource and referral agencies, where appropriate, regardless of ethnic status, cultural background, or special needs. The Superintendent of Public Instruction, in providing funding to child care and development agencies, will promote a range of services which will allow parents the opportunity to choose the type of care most suited to their needs.

B. Service Delivery

Child care and development programs are administered by CDE to deliver services through several major programs in both center-based care and certificate-based programs. CDE contracts with over 850 private and public agencies to deliver services to families that meet each program's eligibility and need criteria. CDE also funds child care resource and referral agencies in all counties of California that provide child care information and referral services to all families. Specific modes of delivery include contracted child care centers and family child care homes networks, and certificate programs contracted to alternative payment program agencies.

C. Recipient Characteristics

Approximately 597,000 children are served in programs administered by the Department of Education, Child Development Division, including 145,429 in Stages 2 and 3 CalWORKs child care and 152,000 in the State Preschool program. They are in age groups from infant/toddlers to school-age children within the age limit guidelines. 68 percent of the families served have one child and another 22 percent have two children. About 76 percent of our families are at or below 50 percent of the state median income and therefore pay no family fees.

D. Program Eligibility

Generally, families are eligible for services if their adjusted monthly income is at or below 75 percent of the state median income as adjusted for family size. Eligibility is also based on the family's need for child care. They must be employed, seeking employment, or participating in an approved job training and education program. Children are served through age 12 unless they have exceptional needs, in which case they can be served through age 18 in federal programs or to age 21 in state programs. In addition, each program may have eligibility criteria for specific population segments, such as in migrant child care and CalWORKs programs.

Families in CalWORKs programs have 24 months of eligibility for Stage 1 and/or Stage 2 and must exhaust those 24 months of eligibility before moving into CalWORKs Stage 3. Families are then subject to the general eligibility requirements for age and income.

E. Program Components or Contents

The 2004-05 Budget Act appropriated \$2.2 billion for California Department of Education's (CDE) Child Care and Development Program in a mix of state (59%) and federal (41%) funds.

GENERAL CHILD CARE AND DEVELOPMENT: These are programs that utilize centers and networks of family child care homes, operated by either a public or private agency, for the provision of child care and development services. These facilities provide an educational program component that is developmentally, culturally, and linguistically appropriate, as well as nutrition, parent education, staff development, and referrals for health and social services.

Family Child Care Home (FCCH) Networks: These networks provide care for children in a family setting and provide the same comprehensive child development services as General Child Care and Development centers. Small FCCHs may serve up to 8 children, while large FCCHs may serve as many as 14 children.

CAMPUS CHILD CARE: These Child Care and Development programs are intended primarily to care for the children of students enrolled in state-run higher education systems. The centers are typically operated by either student associations or the college administration, and provide the same comprehensive services as General Child Care and Development programs.

SEVERELY HANDICAPPED PROGRAM: These Child Care and Development programs, located in the San Francisco Bay Area, provide care and supervision, age and developmentally appropriate activities, therapy, youth guidance, and parental counseling to eligible families. The children and young adults must have an Individualized Family Service Plan or an Individualized Education Plan issued through Special Education programs.

SCHOOL-AGE COMMUNITY CHILD CARE PROGRAMS (LATCHKEY): These programs provide a safe environment, with age and developmentally appropriate activities, for school-age children during the hours immediately before and after the normal school day and during school vacations. These programs must have a minimum of 50 percent enrollment from families that can pay the full cost of care, although this requirement may be waived when the agency can demonstrate the impracticality of such a requirement.

STATE PRESCHOOL PROGRAM: State Preschools are a part-day comprehensive developmental program for three to five year old children from low-income families. The program emphasizes parent education and encourages parent involvement. In addition to basic preschool education activities, other components include health, nutrition, social services, and staff development. These programs are administered through local educational agencies, colleges, community action agencies, and private nonprofit agencies.

STATE PRESCHOOL FULL-DAY PROGRAM: Since 1997, State Preschool contractors were given the opportunity to extend their half-day program to a full-day program with certain restrictions. Some current State Preschool providers chose this “wrap-around” of their existing half-day program in order to provide families with the extended services required to maintain employment, work participation requirements, or education/job training. Agencies continue to operate in a half-day mode as a State Preschool program, but must follow General Child Care and Development rules and regulations for the remainder of the program day.

MIGRANT CHILD CARE: These center-based programs serve children of agricultural workers while their parents are at work. The centers are open for varying lengths of time during the year depending largely on the agricultural-related activities in the area. In addition to centers, the State Budget continues funding for the Migrant Alternative Payment Network Program that allows eligibility and funding for services to follow migrant families as they move to find work in the Central Valley.

ALTERNATIVE PAYMENT (AP) PROGRAM: AP programs offer parents an array of child care arrangements, including in-home care, family child care, and center care. The AP program helps families arrange child care services and makes payment for those services directly to the child care provider selected by the family. The AP program is intended to increase parental choice and accommodate the individual needs of the family. Besides assisting parents in making informed child care choices, the AP program is also responsible for providing parenting information, and professional and technical assistance to providers. Some county welfare departments (CWDs) are among the contractors under this program. AP programs administer Stage 2 and Stage 3 (Set-Aside) of CalWORKs child care and some contract with CWDs to administer Stage 1.

Non-CalWORKs AP: These AP programs provide child care payments for low-income families who meet need and eligibility requirements.

CalWORKs CHILD CARE: CalWORKs grant recipients are (1) required to engage in work and /or work-preparation activities, and (2) provided an array of welfare-to-work services, including child care.

Stage 1 is administered by the California Department of Social Services through CWDs and begins when a participant enters the CalWORKs grant program. CWDs refer families to Child Care Resource and Referral agencies to assist them in finding child care providers. CWDs or their contracted AP programs pay those providers directly for the services performed.

Stage 2 is administered by CDE through its AP program. CalWORKs grant families are transferred into Stage 2 when they are deemed "stable" according to each county's definition of "stable." Participation in Stage 1 and/or 2 is limited to two years after the family stops receiving a CalWORKs grant. A small portion of the services in this stage is administered directly by California Community Colleges through centers or an AP delivery system for the benefit of CalWORKs recipients who are their students.

Stage 3 is also administered by CDE through its AP delivery mode. A family can move to Stage 3 when it has exhausted its two-year eligibility limit in Stages 1 and/or 2 and can remain in Stage 3 as long as the family remains otherwise eligible.

RESOURCE AND REFERRAL (R&R): R&R programs provide information to all parents and the community about the availability of child care, assist potential providers in the licensing process; provide direct services, including training; and coordinate community resources for the benefit of parents and local child care providers. These services are available in all 58 counties in California. R&Rs are often co-located with CWDs to assist with the establishment of CalWORKs child care for recipients in Stage 1.

CalWORKs CHILD CARE

Title XX funds are used in the California Work Opportunity and Responsibility to Kids (CalWORKs) child care and the child care and development programs administered by the Department of Education (CDE). This provides potential eligibility for for-profit child care centers serving children from both welfare families and low-income families to participate in the Child and Adult Care Food Program (CACFP). CACFP is a federal program providing low-income families with healthy meals and snacks in child and adult care facilities.

In the past, for-profit child care centers were not eligible for CACFP due to a federal law that requires at least 25% of their enrolled children be receiving Title XX subsidies. Because Title XX was not used in subsidized child care in California, for-profit child care centers could not participate. Using Title XX funds in CalWORKs child care would allow eligible for-profit child care centers to participate in the program and provide more nutritious meals to children in their care.

A. Intent

Public Law 104-193, enacted in August 1996, replaced the Aid to Families with Dependent Children and the Job Opportunity and Basic Skills programs with the Temporary Assistance to needy Families (TANF) program and provided the TANF Block Grant to fund the program at the State and local level. Assembly Bill 1542, instituted the CalWORKs program on January 1, 1998. An integral component of the CalWORKs program is the three-stage child care system that was developed to assist CalWORKs recipients with attaining self-sufficiency by ensuring the provision of child care services for employment or participation in Welfare-To-Work (WTW) activities. Welfare and Institutions Code 11323.2 specifies that necessary supportive services, including child care, shall be available to every CalWORKs participant to allow participation in the program activity to which she/he is assigned or to accept employment.

B. Service Delivery

Child care services are provided to CalWORKs recipients through a three-stage system. Stage I is administered by the California Department of Social Services through the County Welfare Departments (CWD). CDE administers Stages Two and Three through contracts with Alternative Payment Programs (APP) at the local level. Currently, 32 counties, representing 49% of the Stage One population, contract with APPs to implement Stage One.

The CalWORKs child care program respects parental choice. Parents have the right to choose the provider who meets their needs and will be reimbursed up to the 85th percentile of the market rate in the region, calculated based on an annual regional market rate survey. Recipients who choose a provider with a rate higher than the maximum allowable rate will pay the difference.

C. Recipient Characteristics

A recent study by Policy Analysis for California Education (PACE) found that CalWORKs participants who use subsidized child care are more likely to be English-speaking, have younger children, and are more likely to choose license-exempt provider such as family members and relatives. This PACE study is based on focus group findings from the three counties of Alameda, Kern and Los Angeles in 2000. The reasons included for choosing exempt providers are trust, flexibility in scheduling and payments, and the respect for parents' child rearing practices.

The Growing up in Poverty (GUP) study found similar characteristics among CalWORKs participants who use child care subsidies. These clients tend to be English-speaking, have little or no social support, live in more impoverished neighborhoods, and may have more children. The GUP study interviewed 410 CalWORKs families in San Francisco and Alameda counties in 1998.

D. Program Eligibility

Child care services are available to all CalWORKS recipients that are employed or participating in approved WTW activities. Eligibility for child care services is based on a family's eligibility for a CalWORKS grant and the family's need for child care.

Former CalWORKs recipients may receive 24 months of child care in Stages One and Two from the date they leave cash aid. Former recipient families must have income below 75 percent of the State Median Income, children must meet the age eligibility requirement, and the parent must have a need for child care. A need for child care may include, among other things, employment, training, and education.

E. Program Components or Contents

Current and former CalWORKs recipients may choose any one of the following types of child care:

1. Licensed center-based care
2. Licensed family day care home
3. Licensed-exempt care

DEAF ACCESS ASSISTANCE PROGRAM

A. Intent

The Deaf Access Assistance Program (DAP) was created in 1980 to assure that state and local government programs are routinely adapted to meet the communication needs of the 2.9 million California deaf and hard of hearing persons and to enable hard of hearing children, adults, and families to receive all the benefits and services they are entitled to. The Welfare and Institutions Code (W&IC), Section 2, Chapter 2.1, Section 10621 describes a minimum of seven service categories as “mandated” to ensure that not only would the communication needs of deaf and hard of hearing persons be addressed but combined with additional social services, this program of comprehensive services would help deaf and hard of hearing persons achieve and maintain self-sufficiency and reduce dependency.

B. Service Delivery

The seven mandated social services shall include but not be limited to the following services:

- 1) Communication Services
- 2) Counseling
- 3) Advocacy Services
- 4) Independent Living Skills Instructions
- 5) Job Development and Placement
- 6) Information and Referral
- 7) Community Education

DAP services are provided through a statewide network of eight regional, nonprofit corporations contracted and supervised by the State through the California Department of Social Services, Office of Deaf Access. Pursuant to the W&IC, Section 2, Chapter 2.1, Section 10624, the State – in awarding DAP service contracts – gives special consideration of the extent to which deaf and hard of hearing persons are included in the service provider’s staff and on the Boards of Directors. During a two-year demonstration project, this model of helping deaf people to help themselves was found to be more effective than the traditional medical model where hearing professionals “take care of” deaf people.

The total level of DAP services available within the State is subject to yearly appropriations by the State Legislature and Congress. Current appropriations allow at least some services to all of California's 58 counties.

Service providers also assist public agencies in meeting their legal obligation of maintaining equal communication access to public programs and services by helping public agencies to find qualified sign language interpreters to fill the needs of these public agencies. Under the W&IC, Section 2, Chapter 2.1, Section 10625.1 public agencies then reimburse the service providers for their

actual costs for this communication assistance service. Statewide, in 1997, over 75,000 hours of sign language interpreter services were arranged for public and private agencies.

C. Recipient Characteristics

The DAP provides services to an estimated 2.9 million deaf and hard of hearing persons in California. Client surveys taken in 1997 indicate that approximately 47 percent report themselves as deaf. Another 34 percent report themselves as hearing (includes agencies), and 7 percent of the clients describe themselves as hard of hearing. The remaining 12 percent either did not report or used general terms, such as “hearing impaired”. A small percentage (2 percent) of those who reported themselves as “deaf” also reported that they are both “deaf and blind”.

Recipients include children, adults, and families where deafness or other hearing loss of some type is involved. The Rubella epidemic of 1964 resulted in several hundred adult clients today who have multiple handicaps in addition to their deafness. The refugee population also includes deaf or other hard of hearing individuals who must learn a new language (in this case, American Sign Language) – as their native sign language is not widely used in this country.

The fastest growing portions of the DAP client population in California include persons over the age of 65 experiencing hearing loss for the first time in their lives, the Hispanic population which often relies on Mexican Sign Language to communicate, and the Refugee population which often needs to first learn American Sign Language to communicate.

D. Program Eligibility

There are no income eligibility requirements in the DAP. Services are available to anyone with any degree of hearing loss including hearing individuals or agencies that have any concerns about hearing loss.

E. Program Components or Contents

The following is a listing and description of the services, which make up the DAP. These services are contained in W&IC, Section 2, Chapter 2.1, Section 10621, and Section 65-110 of the CDSS Manual of Policies and Procedures (MPP):

1. Communication Services – Provides qualified sign language interpreters to meet a client’s or agency’s needs. Also includes providing emergency 24 hour, seven days a week, sign language services to meet medical, legal, or civil emergencies. In addition, provides translation of documents for deaf clients with low language skills.
2. Counseling – Provides intervention in crisis situations, such as spousal, child or adult abuse. Also teaches clients how to effectively cope with deafness or hearing loss.

3. Advocacy Services – Provides assistance in crisis situations by intervening to ensure all public services – including social, health, and safety services – are available to the deaf and hard of hearing population. Also includes intervention to protect deaf children's communication rights.
4. Independent Living Skills Instruction – Assists deaf clients in acquiring skills to live independent of public institutions and programs
5. Job Development and Placement – Assists deaf clients in obtaining employment related services.
6. Information and Referral – Directs clients to appropriate organizations/programs for social and health care needs. Answers questions about deafness or hearing loss.
7. Community Education – Increases public awareness and understanding of deaf and other hard of hearing people's needs. Also, addresses health and safety issues because of deafness.

APPENDIX A

PROGRAM APPLICATION TO TITLE XX GOALS

STATE PROGRAM	GOAL 1	GOAL 2	GOAL 3	GOAL 4	GOAL 5
Developmental Services			X	X	
Community Care Licensing			X	X	
CalWORKs Child Care Program	X	X	X		
Dept of Education Child Care Program	X	X	X		
Deaf Access Program	X	X	X		
Foster Care			X		

Goal 1: Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency.

Goal 2: Achieving or maintaining self-sufficiency, including reduction of prevention of dependency.

Goal 3: Preventing or remedying neglect, abuse or exploitation of children and adults unable to protect their own interests.

Goal 4: Preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care.

Goal 5: Securing referral or admission for institutional care when other forms of care are not appropriate or providing services to individuals in institutions.

APPENDIX B
FISCAL DISPLAY

Federal Title XX Allocation

State FY 2001/2002
(Actual)

\$203.5 million

State FY 2002/03
(Actual)

\$204.8 million

State FY 2003/04
(Actual)

\$205.9 million

**State FY 2004/2005
Proposed Funding
(Dollars in Millions)**

<u>Program</u>	<u>Title XX</u>	<u>Other Federal Funds</u>	<u>General Fund</u>	<u>County Fund</u>	<u>Special Funds</u>	<u>Total Funds</u>
DDS Regional Centers	147.9	776.9	1,829.4	0	1.5	2,755.7
Community Care Licensing	55.1	17.4	23.9	0	27.0	123.4
CDE – Child Care	10.0*	893.2	1,236.0	0	0	2,139.2
CalWORKs – Child Care	10.0*	363.2	112.1	0	0	485.3
Deaf Access	3.2	0	-3.2	0	0	0
Child Welfare Services	<u>43.1</u>	<u>0</u>	<u>105.1</u>	<u>0</u>	<u>0</u>	<u>148.2</u>
Total	\$269.3	\$2,050.7	\$3,303.3	\$0.0	\$28.5	\$5,651.8

* TANF Transfer

APPENDIX C

CERTIFICATION REGARDING LOBBYING

Certification For Contracts, Grants, Loans, And Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress, in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal amendment, or modification of any Federal contract, grant, loan or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

California Department of Social Services

ORGANIZATION

Original document signed

AUTHORIZED SIGNATURE

TITLE

DATE

APPENDIX D

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS - PRIMARY COVERED TRANSACTIONS

By signing and submitting this proposal, the applicant, defined as the primary participant in accordance with 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:

(a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or Agency;

(b) have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) are not presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any offenses enumerated in paragraph (l)(b) of this certification; and

(d) have not within a 3-year period preceding this application proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

The inability of a person to provide the certification required above will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the Department of Health and Human Services (HHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

The prospective primary participant agrees that by submitting this proposal, it will include the clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transaction" provided below without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

APPENDIX E

DRUG-FREE WORKPLACE CERTIFICATION

By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

This certification is required by regulations implementing the Drug-Free Workplace Act of 1988, 45 CFR Part 76, Subpart F. The regulations, published in the January 31, 1989 Federal Register, require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when HHS determines to award the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government-wide suspension or debarment.

The grantee certifies that it will provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantees workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing a drug-free awareness program to inform employees about:
 - (1) The dangers of drug abuse in the workplace;
 - (2) The grantee's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and,
 - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:
 - (1) Abide by the terms of the statement; and,
 - (2) Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction;
- (e) Notifying the agency within ten days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction;
- (f) Taking one of the following actions, within 30 days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

- (1) Taking appropriate personnel action against such an employee, up to and including termination; or, (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).